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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration Submitted with Initial Filing OR ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	PLI-980
First Named Inventor	Mary Ziping Luo
COMPLETE IF KNOWN	
Application Number	/
Filing Date	
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled,

GLASS BOTTLE PROTECTIVE ENCLOSURE

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

as United States Application Number or PCT International

☐ was filed on (MM/DD/YYYY) [] (if applicable).

Application Number [] and was amended on (MM/DD/YYYY) []

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(e) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

Hurdon Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

DECLARATION — Utility or Design Patent Application

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :

☐ A petition has been filed for this unsigned inventor

Given Name

Mary Zipping

Family Name

IAKO

(first and middle (if any))

Inventor's
Signature

Mary Zipping Iako

Date

11/30/01

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NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

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Family Name

Zhang

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☐ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/5B02A attached hereto.

type a plus sign (+) inside this box →

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Frank	Middle Initial	Z.	Family Name	Xia	Suffix e.g. Jr.	
Inventor's Signature	<i>Frank Xia</i>					Date	11/3/10
Residence: City	South El Monte	State	CA	Country	U.S.A.	Citizenship	PR
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Post Office Address	1886 Santa Anita Ave.						
City	South El Monte	State	CA	Zip	91733	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Rong	Middle Initial		Family Name	Zhou	Suffix e.g. Jr.	
Inventor's Signature	<i>Rong</i>					Date	11/30/10
Residence: City	South El Monte	State	CA	Country	U.S.A.	Citizenship	PR
Post Office Address	1886 Santa Anita Ave.						
Post Office Address	1886 Santa Anita Ave.						
City	South El Monte	State	CA	Zip	91733	Country	U.S.A.
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name	Denny R.S.	Middle Initial		Family Name	Ko	Suffix e.g. Jr.	
Inventor's Signature	<i>Denny R.S. Ko</i>					Date	11/30/10
Residence: City	South El Monte	State	CA	Country	U.S.A.	Citizenship	USA
Post Office Address	1886 Santa Anita Ave.						
Post Office Address	1886 Santa Anita Ave.						
City	South El Monte	State	CA	Zip	91733	Country	U.S.A.
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name		Middle Initial		Family Name		Suffix e.g. Jr.	
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		Zip		Country	
Additional inventors are being named on supplemental sheet(s) attached hereto							